



Application or Docket Number

08/710388

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

			_						0011		000	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER SMALL	
FOR			NUMBER FILED		NUMBER EXTRA			RATE	FEE	1	RATE	FEE
BASIC FEE								380.00	OR		760.00	
TOTAL CLAIMS / Minus 20= *							X\$ 9=		QR	X\$18=		
INDEPENDENT CLAIMS   minus 3 = *								X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT								.100		1	.000	
* If the difference in column 1 is less than zero, enter "0" in column 2								+130=		OR	+260=	
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	THAN
			umn 1) (Column 2) (Column 3)				SMALL ENTITY OF		OR	OTHER THAN SMALL ENTITY		
ENT &		CLAIM REMAIN AFTE AMENDM	IING R MENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<b>AMENDMENT</b>	Total	* /2	<b>b</b> N	Minus	* 22	=		X\$ 9=		OR	X\$18=	
	Independent	* 3		Vinus	*** 5	=		X39=		OR	X78=	
_	FIRST PRESE	NTATION	OF MUL	TIPLE DEF	PENDENT CLAIM			+130=		OR	+260=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	_	(Colum			(Column 2)	(Column 3)	,				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIM REMAIN AFTE AMENDM	IING R		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	N	Minus	**	=		X\$ 9=		OR	X\$18=	
	Independent	*		Minus	***	=		X39=		OR	X78=	
	FIRST PRESE	NTATION	OF MUL	TIPLE DEF	PENDENT CLAIM		<b> </b>	+130=		1	+260=	
							L	TOTAL		OR	TOTAL	
		(Oal	- 41		(Oakara 0)	(0-10)	1	ADDIT. FEE	_	OR	ADDIT. FEE	
ENTC		(Colum CLAIN REMAIN AFTE AMENDM	IS IING R		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE~	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<b>AMENDMENT</b>	Total	*		Minus	**	=	ŀ	X\$ 9=	FEE	0.0	X\$18=	<u> </u>
	Independent	*	N	Minus	***	=	┟			OR		
٧	FIRST PRESE	NTATION	OF MUL	TIPLE DEF	PENDENT CLAIM		┞	X39=		OR	X78=	-
+130= OR +260=												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												



**Application or Docket Number** 08/710388

Effective October 1, 1995 **CLAIMS AS FILED - PART I** OTHER THAN (Column 1) **SMALL ENTITY** OR **SMALL ENTITY** (Column 2) **FOR** NUMBER EXTRA NUMBER FILED RATE FEE RATE FEE BASIC FEE 375.00 750.00 OR **TOTAL CLAIMS** minus 20 = x\$11=x\$22=OR INDEPENDENT CLAIMS minus 3 = x39 =x78= OR MULTIPLE DEPENDENT CLAIM PRESENT +125= +250= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR **CLAIMS AS AMENDED - PART II OTHER THAN** (Column 1) OR **SMALL ENTITY** (Column 2) (Column 3) SMALL ENTITY **CLAIMS** HIGHEST REMAINING **PRESENT** ADDI-ADDI-NUMBER **AFTER** RATE TIONAL **RATE** TIONAL **AMENDMENT PREVIOUSLY EXTRA** AMENDMENT FEE FEE PAID FOR Total Minus x\$11=x\$22== OR Independent Minus x39 =x78 == OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +125= OR +250= TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 3) (Column 2) **CLAIMS HIGHEST** ADDI- $\mathbf{\omega}$ REMAINING ADDI-**PRESENT NUMBER** RATE **TIONAL** RATE TIONAL **AFTER PREVIOUSLY EXTRA** AMENDMENT FEE FEE **AMENDMENT** PAID FOR Total Minus x\$11=OR x\$22=Independent Minus x39 =OR x78 =FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +125= OR +250= TOTAL **TOTAL** OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS **HIGHEST** ADDI-REMAINING ADDI-ပ **NUMBER PRESENT** RATE TIONAL RATE TIONAL **AFTER AMENDMENT PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR Total Minus x\$11=OR x\$22= Independent Minus x39 =OR x78 =FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +125= +250= \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL TOTAL OR

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

ADDIT, FEE

ADDIT. FEE



## UNITATES DEPARTMENT OF COMMERCE Petent and Tredemark Office ASSISTANT SECRETARY AND COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231

BERIAL MULIBER	FILING DATE	FIRST HAMED APPLICANT	ATTY.DOCKET NO.
18/71	クラクノ		
001 11	4388 ·		EXAMINER

ART UNIT PAPER NUMBER

DATE MAILED:

## NOTICE OF INSUFFICIENT FILING FEES

•	•				
APPLICANT IS GIVEN 30 DAYS FROM THE DAWHICH TO SUBMIT THE BALANCE DUE. External CFR 1.136(a) will not be permitted. I will result in the application becoming	ension of this 30 day period under 37 Failure to respond within this period ng abandoned. 35 U.S.C. 133.				
The filing fees submitted in connection insufficient. See the attached Patent (Form PTO-875). The balance due for a dependent claims is summarized below:	Non it continue to the continu				
A. Filing Fees due upon filing th	e application				
Total Filing Fees Due	= \$ <u>425</u>				
Less Filing Fees Submitted	- \$1436				
BALANCE DUE	= 8 <u>31.00</u>				
B. Pees due in connection with th	e amendment filed on				
Total Fees Due	= \$				
Less Fees Submitted	- \$()				
BALANCE DUE	= \$				
ATTACHMENT: FORM PTO-875	Clerk of Group				
APPLICANT: PLEASE COMPLETE THIS PORTION	N AND RETURN THIS NOTICE WITH PAYMENT				
Fee submitted \$	Signature				
CERTIFICATE (	OF MAILING				
hereby certify that this notice and the required additional fee are being deposited with the U.	S. POSTAL SERVICE as first class mail in an envelope addressed to:				
Commissioner of Patcots and Tradomarks, Washington, D.C. 20231, on (date)					
Print Name: Signature:					
TOL-319(Rev. 7-92)					

· 30 -21 7